

07/16/00
JC542 U.S. PTO

7-17-00

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UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Papalia et al.
TITLE: System and Method to Control Distributed Power Generation Network
DOCKET NO.: EN11111

TRANSMITTAL LETTER

The Honorable Commissioner of Patents and Trademarks Washington, D.C. 20231

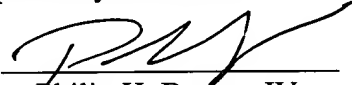
Dear Sir:

Transmitted herewith for filing in the above identified patent application, please find:

1. 23 Pages Specification w/attached Transmittals
2. 4 Sheet of Informal Drawings
3. 1 Return Post Card
4. 1 Transmittal
5. 1 Declaration (3 pages)
6. 1 Recordation (3 pages)
7. 2 Assignments of Invention

Please charge any fees due to Deposit Account No. 50-0304.

Respectfully submitted:

By: 
Philip H. Burrus, IV

SEND CORRESPONDENCE TO:

Motorola, Inc. Energy Systems
Group

Associate Agent of Record

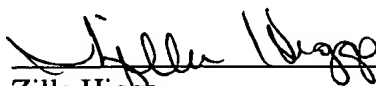
1700 Belle Meade Court
Lawrenceville, GA 30043

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CERTIFICATE OF MAILING

Date of deposit: 7-14-00

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EN11111 Papalia et al.

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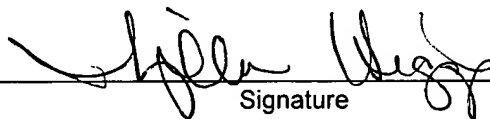
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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2000</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</p>		Complete if Known	
TOTAL AMOUNT OF PAYMENT (\$) 766		Application Number	
		Filing Date	
		First Named Inventor Papalia	
		Examiner Name	
		Group / Art Unit	
		Attorney Docket No. EN11111	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number 50-0304</p> <p>Deposit Account Name Motorola, Inc.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Philip H. Burrus, IV	Registration No. (Attorney/Agent)	45,432
Signature		Telephone	770-338-3227
		Date	7/13/00

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